

NOTIFICATION LETTER  
FREE AND REDUCED-PRICE MEALS OR FREE KINDERGARTEN MILK  
PRICING PROGRAM

**[Date]**

Dear Parent/Guardian:

Because of your participation in the Food Stamp Program, Department of Public Health and Human Services, the students listed below who are residing in your home have been approved to receive free school meals. No additional action is necessary by you.

**[Add Student Names Here]**

If you do not agree with the decision, you may discuss it with the school official. If you wish to review the decision further, you have a right to a fair hearing. This can be done by calling or writing to the following hearing official:

_____	_____	_____
<b>[Hearing Official]</b>	<b>[Address]</b>	<b>[Telephone]</b>

Sincerely,

**[Signature]**

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.